

FORM TO BE USED BY FEDERAL INMATES IN FILING A CIVIL ACTION UNDER 28 USC § 1331 OR § 1346

REVISED 8/05

IN THE UNITED STATES DISTRICT COURT  
FOR THE EASTERN DISTRICT OF TEXAS  
Beaumont DIVISION

JOHN ROBERT HORNER  
691650-018

(Enter above the full name and inmate number  
of each plaintiff in this action)

VS.

Case No. 1:23 cv 49  
(Clerk will assign the number)

WARDEN BANTLETT  
(AND ALL PEOPLE IN SUIT) INDIVIDUALLY

AND IN THEIR OFFICIAL CAPACITIES  
(Enter above the full name of each defendant in this action).

## I. PREVIOUS LAWSUITS:

A. Have you filed any other lawsuits in state or federal court dealing with the same facts involved in this action or otherwise relating to your imprisonment? ☒ YES ☒ NO

B. If your answer to "A" is "yes," describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, giving the same information.)

1. Approximate date of filing lawsuit: \_\_\_\_\_

2. Parties to previous lawsuit:

Plaintiff(s) JOHN ROBERT HORNER BEAUMONT PRISON

Defendant(s) USA, F.B.I., OKLAHOMA PRISON, DICKERSON

3. Court: (If federal, name the district; if state, name the county.) WESTERN DISTRICT OF OKLAHOMA

4. Docket Number: \_\_\_\_\_

5. Name of judge to whom case was assigned: \_\_\_\_\_

6. Disposition: (Was the case dismissed, appealed, still pending?) \_\_\_\_\_

7. Approximate date of disposition: \_\_\_\_\_

II. PLACE OF PRESENT CONFINEMENT: FCC BEAUMONT UNITED STATES PENITENTIARY

III. EXHAUSTION OF GRIEVANCE PROCEDURES:

Pursuant to 42 U.S.C. § 1997e(a), exhaustion of administrative remedies is required prior to initiating a civil rights action or Federal Tort Claims Act lawsuit. Copies of all grievances, appeal and responses must be submitted to verify exhaustion. Failure to demonstrate exhaustion may be grounds for dismissal. The rules for federal prisoners are found at 42 C.F.R. §§ 542.10, *et seq.*

1. Informal Grievance

a. Did you submit an informal grievance. ✓ YES ✓ NO  
If so, you must attach a copy of the grievance and response.

b. If not, then why not?

WROTE ELECTRONIC AND PAPER FORM. CAN'T PRINT ELECTRONIC COPIES AS  
FACILITY REFUSES TO ALLOW ME A COPY.

2. Formal Grievance

a. Did you submit a formal grievance (BP-9)? ✓ YES ✓ NO  
If so, you must attach a copy of the grievance and response.

b. If not, then why not?

STAFF REFUSE TO GIVE ME FORMS, ALSO THREATEN RETALIATION

3. Appeal to the Regional Director of the Bureau of Prisons

a. Did you timely submit an appeal to the Regional Director (BP-10)? ✓ YES ✓ NO  
If so, you must attach a copy of the appeal and response.

b. If not, then why not?

HANDWRITTEN "Sensitive 10" BUT NEVER LEFT FACILITY OR COME BACK  
AND STAFF (WARDEN, UNIT MANAGER, CASE MANAGER BLACKMON) REFUSE

4. Appeal to the General Counsel of the Bureau of Prisons

a. Did you timely submit an appeal to the General Counsel of the Bureau of Prisons (BP-11)? ✓ YES ✓ NO  
If so, you must attach a copy of the appeal and response.

b. If not, then why not?

ASK FOR FORM OR PHONE CALL TO DIRECTOR OR MARSHALL'S SERVICE AND WAS  
REFUSED.

IV. PARTIES TO THIS SUIT:

A. Name and address of each plaintiff: JOHN ROBERT HORNER 69650-018

(UNITED STATES PENITENTIARY), P.O. BOX 26030

CT BEAUMONT, TX 77720

- B. Full name of each defendant, his official position, his place of employment, and his full mailing address. If you are bringing a civil rights lawsuit against federal employees, then your lawsuit should be filed pursuant to 28 U.S.C. § 1331. If you are bringing a Federal Tort Claims Act lawsuit under 28 U.S.C. § 1346, then the only defendant will be the United States of America.

Defendant #1: (WARDEN) BANTLETT, (WARDEN) RESPONSIBLE FOR OPERATIONS SAFETY, AND WELFARE OF ALL INMATES P.O. Box 26030 Beaumont, TX 77720

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

Defendant #2: BUCKLE. CAPTAIN

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

Defendant #3: WELLPATH CONTRACTED MEDICAL PROVIDER IN CHARGE OF INMATE HEALTH & MEDICATION

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

Defendant #4: \_\_\_\_\_

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

WARDEN BANTLETT HAS HAD ME PLACED IN CONFINEMENT ALLOWED OUT FOR 1hr EVERY 166 hrs.

#### V. STATEMENT OF CLAIM:

State here in a short and plain statement the facts of your case, that is, what happened, where it happened, when it happened, and who was involved. Describe how each defendant is involved. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach extra pages if necessary, but remember that the complaint must be stated briefly and concisely. **IF YOU VIOLATE THIS RULE, THE COURT MAY STRIKE YOUR COMPLAINT.**

WARDEN BANTLETT Refused TO Allow ME TO ① ACCESS COURTS, LAW Library OR call my lawyer ② Refused me Exercise/sports 1 Hour ③ Denied me medical HEALTH CARE By PLACING ME IN A DORM (UNIT DA) WHICH INMATES ARE ALLOWED 20 minutes Every 3-5 Days FOR EITHER A Phone CALL SHOWER OR TO CHECK Email WHEN ASKED FOR BP8-11 SAYS "NOT IN my CONTROL" CAPTAIN Buckles Allowed officers TO Threaten INMATES when THEY ASK



- C. Has any court ever warned or notified you that sanctions could be imposed? \_\_\_\_\_ YES \_\_\_\_\_ NO
4. Have the sanctions been lifted or otherwise satisfied? \_\_\_\_\_ YES \_\_\_\_\_ NO
3. Approximate date sanctions were imposed: \_\_\_\_\_
2. Docket Number: \_\_\_\_\_
1. Court that imposed sanctions (if federal, give the district and division): \_\_\_\_\_
- B. If your answer is "yes," give the following information for every lawsuit in which sanctions were imposed. (If more than one, use another piece of paper and answer the same questions.)
- A. Have you been sanctioned by any court as a result of any lawsuit you have filed? \_\_\_\_\_ YES \_\_\_\_\_ NO

## VIII. SANCTIONS:

- B. List all prisoner identification numbers you have ever been assigned and all other state or federal prison or FBI numbers ever assigned to you, if known to you. 345861 (Facc) 63650-018 (Federal)
- A. State, in complete form, all names you have ever used or been known by including any and all aliases: John Hume, John Schoenfeld, Big Red, Jason Reed

## VII. GENERAL BACKGROUND INFORMATION:

I want ~~months~~ ~~nothing~~ ~~here~~, to be compensated for (emotional, mental, physical, and financial) stress, released from prison (12 months Haring House) AND for BOP to GIVE PRISONERS THEIR CONSTITUTIONAL RIGHTS,

## VI. RELIEF: State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

All Defendants were sent paper and electronic COPIES/REQUEST. WHICH I would provide copies but SHAR won't allow use of inmate printer AND SAID "IF COURT WANTS/NEEDS THEM THEN THEY WILL ASK"

Medical Provider "wellpath" allowed Defendant to be denied medical treatment AND HELP. Discontinued all medicines which caused inmates to have extreme withdrawal AND seizures. All Medical Providers, nurses, and doctors knew of my medication AND without would happen if denied medication.

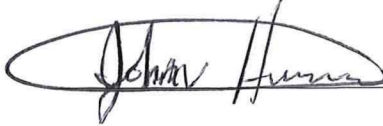
To have Phone call to U.S. MARSHALLS Service Monitor A sensitive BP-10 to TUBS

Region on Prison Issues.

D. If your answer is "yes", give the following information for every lawsuit in which warning was imposed. (If more than one, use another piece of paper and answer the same questions.)

1. Court that imposed warning (if federal, give the district and division): \_\_\_\_\_
2. Docket Number: \_\_\_\_\_
3. Approximate date warnings were imposed: \_\_\_\_\_

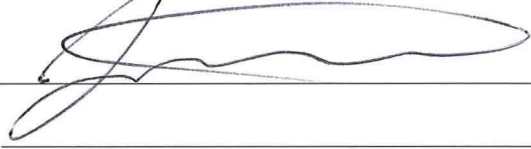
Signed this 29<sup>TH</sup> day of JANUARY, 20 23.  
(date) (month) (year)

  
\_\_\_\_\_

(Signature of each plaintiff)

**I DECLARE (OR CERTIFY, VERIFY OR STATE) UNDER PENALTY OF PERJURY THAT THE FOREGOING STATEMENTS OF FACT, INCLUDING ALL CONTINUATION PAGES, ARE TRUE AND CORRECT.**

Executed on: 1/29/2023  
(Date)

  
\_\_\_\_\_

(Signature of each plaintiff)

**WARNING: The Plaintiff is hereby advised any false or deliberately misleading information provided in response to the following questions will result in the imposition of sanctions. The sanctions the Court may impose include, but are not limited to monetary sanctions and/or the dismissal of this action with prejudice.**

John Horner 69650-018  
United State Penitentiary  
P.O. Box 26030  
Beaumont, TX 77720

NORTH HOUSTON TX 773

30 JAN 2023 PM 5 L



CLERK, U.S. DISTRICT COURT  
RECEIVED

FEB 01 2023

EASTERN DISTRICT OF TEXAS  
BEAUMONT, TEXAS

Clerk U.S. DISTRICT  
300 Willow Street  
Beaumont, TX 77701

77704-600199

